

an appointment with a psychiatrist falling from more than 50 to less than 20 days). Nevertheless other improvements seem longer to achieve (decrease of non attendances).

Conclusion: This report stresses the interest of health services research in achieving significant improvements, regardless of the ideological controversies at stake.

P0155

Organizing structured assessment and care of polydrug users: Tools and insights from the FACE© program

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Background: Polydrug using persons pose particular challenges in mental health practice that result from the complexity of cumulative intertwined effects of the addictive course on their cognitive, affective and neurobiological functioning.

Aim and Method: To respond to this challenge, this paper presents systematized evidence-based tools developed as part of the multi-site FACE© program (Facilitating Adjustment of Cognitions and Emotions) and analyses how the organization of structured multidimensional assessments impacts on the diagnostic and treatment phases with a series of polydrug and alcohol abusing persons.

Results: At a diagnostic level, practice systematization using a thorough, multidimensional, evidence-based anamnestic protocol appears mandatory to provide the internationally recommended assessment data relevant to designing informed care pathways (cf. World Health Organization, France's 'Haute Autorité de Santé', Belgium's 'Conseil Supérieur de la Santé'). At a treatment level, this protocol reveals beneficial to the practitioner–client relationship, facilitating initiation of a therapeutic contract. Further “assessment to treatment” tools, including monitoring of polydrug use through structured observational agendas and time-line analyses, respond to multiple care challenges by providing both diagnostic and follow-up data. Early treatment course application of psycho-education sessions into self-observational “homework” strategies further benefits comprehension and control of the addiction course by clients.

Conclusions: Evidence-based, structured “assessment to treatment” tools appear to provide valuable insights regarding polydrug use severity, dynamics and contingencies, relevant to initial multidisciplinary assessment and treatment course evaluation. Significantly, these are also found to ameliorate addiction insight along with facilitating cognitive-emotional regulation by the client. Further research and practice implications are advocated.

P0156

Joint crisis plans: A new approach to reduce hospital admissions

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Patients with psychotic or bipolar disorders often relapse and are often admitted for in-patient care.

Patient empowerment and a better collaboration with caregivers could allow for a early detection of crises, a better treatment of relapses and may avoid hospital admission.

Joint crisis plans (JCP) are prepared in a collaboration between patients, caregivers and mediators (a third party chosen by the patient), at a time when the patient is stable.

JCPs indicate in advance the patient's preferences for healthcare, in prevision of times when the patient may be ill to express them

What is not known is whether JCPs can produce similar effects in the Swiss healthcare system.

The aims of this pilot study is to assess the acceptability of JCPs and the satisfaction of patients and caregivers, and to describe how JCPs can be integrated in the healthcare system in Geneva.

If results are positive, a further study could assess the impact of JCPs on relapse, hospital admissions and costs.

This innovative project could lead to substantial changes in the organization of healthcare, and has important policy implications.

P0157

How breast cancer affect women's quality of life in Iran

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Introduction: Breast cancer is one the the most causes of death among Iranian womens. Recently, quality of life (QOL) has been in focus of reseaches. The diagnosis and treatment of breast cancer are, two aspects of QOL . This study assess the impact of breast cancer on Body Image and, which has been not in focus of attention in Iran.

Method: The self-administrated questionnaire, which it's validity and reliability were assessed in local population .Eighty three patients with breast cancer were participated in this survey in Kerman/Iran in the year 2007.. The patients divided to three groups(based on kinds of treatment), and asked to complete demographic data and questionnaire.Statistical comparisons were made using the standard tests.

Results: The mean age of participants was 49.9±11.8.We found relationship between the age of patients and the Body Image (p<0.0003), Sexual desire (p<0.001) and sexual activity(p<0.001).

Body Image, Sexual desire and sexual activity had strong relationship with marital status, education of patients and her partner. Number of children had correlation with Body Image. A significant negative correlation was found between stage of cancer with Body Image, Sexual desire and sexual activity.

Sexual desire and sexual activity had relations with kind of treatment(P1<0.000, p2<0.003).

Conclusion: Body image and sexuality after cancer diagnosis or treatment deserves much more attention. Health care providers need to explore in much more detail in the influence of cancer on Body Image and sexuality (in the cultural background).

P0158

Evaluation of “lost to follow up” in psychiatric outpatient clinic

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Lost to follow up in psychiatric practice represents a serious problem. Patients who are not cared often will worsen, are linked to more hospitalizations, risk of violence and higher cost for the community.